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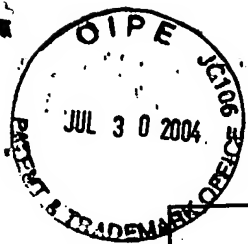
PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	ORT-1476 (CONT)			
	First Named Inventor	William J. Hoekstra et al.			
	COMPLETE IF KNOWN				
	Application Number				
	Filing Date	February 10, 2004			
	Group Art Unit				
Examiner Name					
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: TRICYCLIC BENZODIAZEPINES AS VASOPRESSIN RECEPTOR ANTAGONISTS <i>(Title of the Invention)</i> the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> is identified by Attorney Docket Number ORT-1476 CONT, which appeared on the specification as filed on 10 February 2004 I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/116,358	January 19, 1999	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
09/468,650 09/911,605	December 21, 1999 July 24, 2001	Abandoned Allowed

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☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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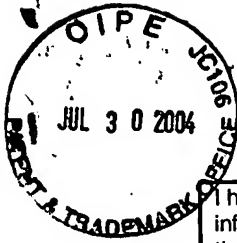
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) William J.		Family Name or Surname HOEKSTRA	
Inventor's Signature <i>William J. Hoekstra</i>		Date 11 March 2004	
Residence: City Chapel Hill	State NC	Country U.S.A.	Citizenship U.S.A.
Mailing Address 104 San Miguel Place			
City Chapel Hill	State NC	ZIP 27514	Country U.S.A.

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alexey B.		Family Name or Surname DYATKIN	
Inventor's Signature		Date	
Residence: City Lansdale	State PA	Country U.S.A.	Citizenship Russia
Mailing Address 757 East Main Street, Apt. J208			
City Lansdale	State PA	ZIP 19445	Country U.S.A.

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Bruce E.		Family Name or Surname MARYANOFF	
Inventor's Signature		Date	
Residence: City Forest Grove	State PA	Country U.S.A.	Citizenship U.S.A.
Mailing Address 4029 Devonshire Drive			
City Forest Grove	State PA	ZIP 18922	Country U.S.A.



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☐ Practitioner(s) named below:
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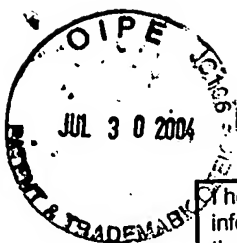
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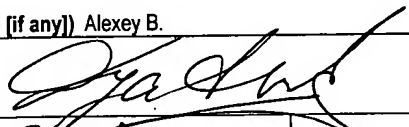

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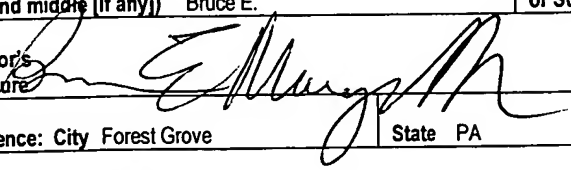
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) William J.		Family Name or Surname HOEKSTRA	
Inventor's Signature		Date	
Residence: City Chapel Hill	State NC	Country U.S.A.	Citizenship U.S.A.
Mailing Address 104 San Miguel Place			
City Chapel Hill	State NC	ZIP 27514	Country U.S.A.

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alexey B.		Family Name or Surname DYATKIN	
Inventor's Signature 		Date 03/15/04	
Residence: City Lansdale MAPLE GLEN	State PA	Country U.S.A.	Citizenship Russia
Mailing Address 757 East Main Street, Apt. J208 504 Dogwood Drive 			
City Lansdale MAPLE GLEN	State PA	ZIP 19002 10445	Country U.S.A.

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Bruce E.		Family Name or Surname MARYANOFF	
Inventor's Signature 		Date 15 Mar 04	
Residence: City Forest Grove	State PA	Country U.S.A.	Citizenship U.S.A.
Mailing Address 4029 Devonshire Drive			
City Forest Grove	State PA	ZIP 18922	Country U.S.A.



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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Jay M.		Family Name or Surname MATTHEWS	
Inventor's Signature <i>Jay M. Matthews</i>		Date 3/15/04	
Residence: City Lansdale	State PA	Country U.S.A.	Citizenship U.S.A.
Mailing Address 305 Walden Lane			
City Lansdale	State PA	ZIP 19446	Country U.S.A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

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NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
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